

PART B - FEE(S) TRANSMITTAL

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30623 7590 12/05/2006

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03/05/2007 LWONDIM2 00000034 10659128

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Marina Krioutchkova	(Depositor's name)
<i>[Signature]</i>	(Signature)
March 2, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/659,128	09/10/2003	David G. Therrien	25452-016	3561

TITLE OF INVENTION: METHOD AND APPARATUS FOR MANAGING DATA INTEGRITY OF BACKUP AND DISASTER RECOVERY DATA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	03/05/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHUNG, PHUNG M	2138	714-710000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Mintz, Levin, Cohn**
 2 **Ferris, Glovsky and**
 3 **Popeo, P.C.**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Exagrid Systems, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Westboro, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
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- ☒ A check is enclosed.
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **50-0311** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Boris A. Matvenko

Date

March 2, 2007

Typed or printed name

Registration No.

48,165

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Date of Deposit: March 2, 2007

Attorney Docket No.: 25452-016

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: David Therrien et al. Examiner: Chung, Phung M.
Serial No.: 10/659,128 Group Art Unit: 2138
Filed: September 10, 2003 Confirmation No.: 3561
Attorney Docket No.: 25452-016

Title: **METHOD AND APPARATUS FOR MANAGING DATA
INTEGRITY OF BACKUP AND DISASTER RECOVERY DATA**

MAIL STOP ISSUE FEE

Commissioner for Patents
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TRANSMITTAL LETTER

Sir:

Transmitted herewith for filing in the above-referenced patent application are the following documents:

1. Completed Form PTOL-85 in duplicate (1 page);
2. Check Number 3605 in the amount of \$1,000.00 (\$700.00 for Issue Fee and \$300.00 for Publication Fee); and
3. Return Postcard.

Although Applicants believe that no additional fees are due in connection with this submission, the Director is authorized to charge any deficiencies due, or to credit any overpayment, to the undersigned's account, Deposit Account No. **50-0311** Ref. No. **25452-016**, Customer No. **35437**. A duplicate copy of this transmittal letter is enclosed.

Respectfully submitted,

Dated: March 2, 2007

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